

Client Payroll Information Disclosure Worksheet

Taxpayer Information		
Name of taxpayer:		Employer Identification Number (EIN):
Address (number, street, and room/suite number):		State ID Number (if different than above):
City, State & Zip Code:		Unemployment ID Number:
Contact Person:	Title:	Business Telephone Number:
Email Address:	Fax Number:	Other Telephone Number:
Payroll Services to be Provided Please indicate which payroll services you would like Thomson & Metivier PC to provide you with and include any additional information required for those services to be performed. If any services do not apply please leave blank.		
Preparation of Payroll	Payroll schedule (weekly, biweekly, monthly etc)	
Payroll Tax Deposits	Federal Tax Deposits ☐ Quarterly ☐ Monthly ☐ Semiweekly ☐ State Withholding ☐ Annual ☐ Quarterly ☐ Monthly ☐ FUTA Tax Deposits ☐ Annual ☐ Quarterly ☐ SUTA Tax Deposits ☐ Quarterly	
Quarterly Payroll Reports	Form 941 Employer's Federal Tax Report Form 1028 State Unemployment Report Form 5080 State Withholding & Sales Tax	
Annual Payroll Reports	Form 940 Federal Unemployment Form 5081 Annual Return for State Sales and Withholding Form W3/W2's Wage and Tax Statements Form 1098/1099's Independent Contractor Statements	
Other	List:	
Online Account & Banking Information		
Federal EFTPS Information	Michigan Treasury Online	MiWAM Account Information
PIN	User ID	Username
Password	Password	Password
Bank Name	Individual Name on Account	
Routing Number	Accounting Number	
QuickBooks Account	Other	Other
User ID	User ID	User ID
Password	Password	Password
Authorization Agreement		
I authorize Thomson & Metivier PC to utilize the di	greement does not relieve me, as the tax re made, and also that I may be responsi res for me. I further certify that I have t	he authority to execute this form and authorize
	Title	Date